

10/518553

PATENT APPLICATION SERIAL NO.

U.S. DEPARTMENT OF COMMERCE
PATENT AND TRADEMARK OFFICE
FEE RECORD SHEET

12/29/2004 SNAJARRO 00000097 10518553

01 FC:1631	300.00 OP
02 FC:1632	500.00 OP
03 FC:1633	200.00 OP
04 FC:1617	130.00 OP
05 FC:1615	1600.00 OP

Repin. Ref: 06/02/2005 KBALTIMO 0014070000
DAH:022446 Name/Number:10518553
FC: 9204 \$100.00 CR

Adjustment date: 06/02/2005 KBALTIMO
12/29/2004 SNAJARRO 00000097 10518553
~~02 FC:1632~~ ~~-500.00 OP~~

06/02/2005 KBALTIMO 00000017 10518553

01 FC:1642 400.00 OP

PTO-1556
(5/87)

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND																																																					
1 Date of Request: <u>6/2/05</u>		2 Serial/Patent # <u>10/578553</u>																																																			
3 Please refund the following fee(s): <table border="1" style="width:100%; border-collapse: collapse;"> <tr><td style="width: 10%;"></td><td style="width: 40%;">Filing</td><td style="width: 10%;">4 PAPER NUMBER</td><td style="width: 10%;">5 DATE FILED</td><td style="width: 10%;">6 AMOUNT</td></tr> <tr><td></td><td>Amendment</td><td></td><td></td><td>\$</td></tr> <tr><td></td><td>Extension of Time</td><td></td><td></td><td>\$</td></tr> <tr><td></td><td>Notice of Appeal/Appeal</td><td></td><td></td><td>\$</td></tr> <tr><td></td><td>Petition</td><td></td><td></td><td>\$</td></tr> <tr><td></td><td>Issue</td><td></td><td></td><td>\$</td></tr> <tr><td></td><td>Cert of Correction/Terminal Disc.</td><td></td><td></td><td>\$</td></tr> <tr><td></td><td>Maintenance</td><td></td><td></td><td>\$</td></tr> <tr><td></td><td>Assignment</td><td></td><td></td><td>\$</td></tr> <tr><td><input checked="" type="checkbox"/></td><td>Other <u>Search fee adjustment</u></td><td></td><td></td><td>\$</td></tr> </table>		Filing	4 PAPER NUMBER	5 DATE FILED	6 AMOUNT		Amendment			\$		Extension of Time			\$		Notice of Appeal/Appeal			\$		Petition			\$		Issue			\$		Cert of Correction/Terminal Disc.			\$		Maintenance			\$		Assignment			\$	<input checked="" type="checkbox"/>	Other <u>Search fee adjustment</u>			\$	7 TOTAL AMOUNT OF REFUND <div style="border: 1px solid black; padding: 5px; display: inline-block; margin-left: 20px;">\$ 100</div>		
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<input checked="" type="checkbox"/>	Other <u>Search fee adjustment</u>			\$																																																	
10 REASON: <input checked="" type="checkbox"/> Overpayment <input type="checkbox"/> Duplicate Payment <input type="checkbox"/> No Fee Due (Explanation):		8 TO BE REFUNDED BY: <input type="checkbox"/> Treasury Check <input checked="" type="checkbox"/> Credit Deposit A/C #: <div style="border: 1px solid black; padding: 2px; display: inline-block; margin-left: 20px;"> 9 02--2448 </div>																																																			
11 REFUND REQUESTED BY: <div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> TYPED/PRINTED NAME: <u>Kaya Lewis (Baltimore)</u> SIGNATURE: <u>[Signature]</u> OFFICE: <u>DO/EO</u> </div> <div style="width: 35%;"> TITLE: <u>Paralegal</u> PHONE: <u>(703) 308-9140</u> <u>ext 202</u> </div> </div>																																																					
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: APPROVED: _____ DATE: _____																																																					

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to: